U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:	Case Number:						
An appearance is hereby filed by the undersigned as attorney for:							
Attorney name (type o	or print):						
Firm:							
Street address:							
City/State/Zip:							
Bar ID Number: Telephone N See item 3 in instructions)			Numb	er:			
Email Address:							
Are you acting as lead counsel in this case?					Yes	No	
Are you acting as local counsel in this case?					Yes	No	
Are you a member of the court's trial bar?					Yes	No	
f this case reaches trial, will you act as the trial attor			ney?	?	Yes	No	
f this is a criminal case, check your status.			Retained Counsel				
			Appointed Counse If appointed counse				
			а	Fede	eral Defende	er	
				CJA	Panel Attori	ney	
general bar or be granted declare under penalty of	his Court an attorney must leave to appear <i>pro hac vic</i> perjury that the foregoing is as the same force and effec	e as provid true and c	led fo	or by lo ct. Und	ocal rules 83.12 er 28 U.S.C.§	2 through 83.14. 1746, this	
Executed on							
Attorney signature:	S/ (Use electronic signature	if the appe	aran	ice form	n is filed electr	onically.)	